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Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).			Complete if Known				
· · · · · · · · · · · · · · · · · · ·			tion Number	10/551,298			
FEE TRANSMITTAL		Filing D)ate	September 23, 2005			
for FY 2009			amed Inventor	Andreas BERGMANN			
Applicant claims small entity status. See 37 CFR 1.27			er Name	Christine E. Foster			
		Art Uni	Art Unit 1641				
TOTAL AMOUNT OF PAYMENT	(\$) 1,460.00	Attorne	y Docket No.	VOSS-0043			
METHOD OF PAYMENT (chec	k all that apply)						
,	11.77		1 11 11	`			
☐ Check ☐ Credit Card ☐ I	· -	☐ Other (•	· -			
Deposit Account Deposit Account Number: 13-3402 Deposit Account Name: Millen White Zelano & Branigan PC For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)							
_	•	r is nereby	_		•		
☐ Charge fee(s) indic			_	•		ot for the filing fee	
Charge any addition Under 37 CFR 1.1	onal fee(s) or underpayment	ts of fee(s)	∠ Crec	lit any overpaymen	ts		
WARNING: Information on this form may	y become public. Credit card inf	formation sho	uld not be includ	led on this form. Provi	de credit card		
information and authorization on PTO-20. FEE CALCULATION	38.						
	NID DW ARAERI ADEAR ST	a Di C					
1. BASIC FILING, SEARCH, AND EXAMINATION FEES FILING FEES SEARCH FEES EXAMINATION FEES							
	Small Entity	02/11/01/	Small Entit		mall Entity		
Application Type Fee (S		<u>Fee(\$)</u>	<u>Fee(\$)</u>	<u>Fee(\$)</u>	<u>Fee(\$)</u>	Fees Paid (\$)	
Utility 330		540	270	220	110		
Design 220		100	50	140	70		
Plant 220		330	165	170	85		
Reissue 330 Provisional 220	165 110	540	270 0	650 0	325		
	110	U	U	U	U	C	
2. EXCESS CLAIM FEES For Description					Fee (\$)	Small Entity Fee (\$)	
<u>Fee Description</u> Each claim over 20 (including Reissues)						26	
Each independent claim over 3 (including Reissues)					52 220	110	
Multiple dependent claims						195	
	<u>a Claims </u>		<u> Paid (\$)</u>			Dependent Claims	
$\frac{67}{1}$ -20 or HP= $\frac{35}{1}$	x = 26 =	= <u>910</u>	<u>)</u>		<u>Fee (\$)</u>	Fee Paid (\$)	
HP = highest number of total claim	· ·	-	D = : -! (/ b)				
<u>Indep. Claims</u> <u>Extr.</u> 14 - 3 or HP= 5	<u>a Claims</u> <u>Fee(\$)</u> x 110	= 550	<u>Paid (\$)</u>				
HP = highest number of independent			<u>)</u>				
3. APPLICATION SIZE FEE	, J						
If the specification and drawings	exceed 100 sheets of paper	r (excluding	g electronicall	ly filed sequence or	r computer		
	52(e)), the application size			r small entity) for ε	each additions	al 50	
	See 35 U.S.C. 41(a)(1)(G			. .	F (Φ)	Г D-:-I (ф)	
<u>Total Sheets</u> <u>Extra</u> - 100 =				fraction thereof	<u>Fee (\$)</u> -	Fee Paid (\$)	
4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount)							
Other (e.g., late filing surcharge):							
Saler (e.g., face firing sur							
SUBMITTED BY				·		<u> </u>	
Signature /Anthony J	. Zelano/		Registration No.	27,969	Telephon	e 703-243-6333	
Anthony J.			(Attorney/Agent)	21,303	relebilon	, 30 240 0000	

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.